

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

John B. Pirog

COURT CASE NUMBER

C08-2094 WHA

DEFENDANT

Michael J. Astrue

TYPE OF PROCESS

Summons, Complaint, Orders

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

US Attorney's Office, Civil Process Clerk,

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

450 Golden Gate Ave., Box 36055, San Francisco, CA 94102

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

John B. Pirog
c/o General Delivery, Mail Pick Up
Novato, CA 94949Number of process to be
served with this Form 285

4

Number of parties
served in this case

3

Check for service on U.S.A. CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIASPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of:

☐ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

415-522-2061

DATE

4/29/08

SUSAN IMBRIANI

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 11

Signature of Authorized USMS Deputy or Clerk

Date

3/1/08

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

DIANN LACKY - PARALEL

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date
05/06/08Time
9 45
☒ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$45.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

\$45.00

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00